

## **Resilient Partners: The Development of a University-Community Collaboration to Promote Wellness for Head Start Children and Families**

By: Julia L. Mendez and Blake Te'Neil Lloyd

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### **Abstract:**

This paper describes a theoretically driven approach uniquely suited for the development of research partnerships between university teams and local communities serving children enrolled in Head Start programs. A literature review on dimensions of successful research partnerships provides a backdrop for presenting the Resilience Partnership-Directed Approach (RPA) to conducting wellness research, with a specific emphasis on issues that arise when working with ethnic minority populations. RPA involves four stages that capture the evolution of collaborative research initiatives involving university-based research teams and community partners. Key methods and expected outcomes for each stage are reviewed and examples from a parent involvement project illustrate how attention to core processes of collaboration can produce data that benefit both the practitioner and research communities. The paper concludes with recommendations regarding the use of RPA and a discussion of a research partnership's effects on training for undergraduate and graduate students.

### **Article:**

An overarching goal of some research partnerships between universities and communities is wellness promotion, an idea which has its roots in the writings of Emory Cowen and his colleagues (Cicchetti & Rappaport, 2000). The essence of a wellness approach is to examine how individuals overcome adverse life circumstances to develop and maintain competence within a range of social settings, including families, neighborhoods, schools, and communities. As an alternative view regarding the study of mental illness, Cowen (1991, 1994) declared the need for a paradigm shift in psychology from treatment of mental illness towards the ideals of health and competence for the entire population. Sarason (2000) observed that wellness is grounded in the concepts of the primary prevention field, a field that has typically focused on how to reduce the incidence of mental and physical health problems within the general population. The pursuit of wellness embraces four key principles that inform psychological and educational interventions: competence, resilience, empowerment, and social system modification (Cowen, 1991).

To advance this agenda, researchers traveling along a wellness pathway may need to acquire new equipment and leave some baggage behind. The implementation of a wellness research agenda requires strong partnerships in which researchers and practitioners travel together along a path towards enhanced service delivery. According to Cowen's (1994) approach, modification of

social settings that serve children is a necessary component for enhancing children's competence. Therefore, the ultimate challenge for applied researchers is to ensure that entrée into a community facilitates a bidirectional exchange of information and ideas that can produce systemic, long-lasting change (Wiley & Rappaport, 2000). The purpose of this paper is to use a case study to illustrate a theoretically driven approach for the study and promotion of wellness with children and families attending Head Start programs.

## OVERCOMING BARRIERS AND FORMING RESEARCH PARTNERSHIPS

In the past, researchers' disregard for the context of economic disadvantage has produced a literature that overemphasizes the deficiencies and failures of low-income and ethnic minority children (Garcia Coll, et al., 1996; McLoyd, 1990; Spencer, 1990). Specifically, comparative research designs have used a white, middle-class standard for examining the development of minority children, without careful attention to issues of race, social class, or cultural socialization (Graham, 1992; McLoyd & Ceballo, 1998; Mendez, Cicchetti & Fantuzzo, 2002). For these reasons, members of minority groups, particularly those with personal experiences of disenfranchisement and discrimination, may be cautious about involvement with educational researchers (Cauce, Ryan, & Grove, 1998). In many cities, relations are generally strained between privileged university settings and surrounding communities characterized by an extreme lack of resources. When researchers seek to conduct studies within impoverished communities, differences in power exist among researchers, practitioners, and study participants (Fantuzzo & Mohr, 1998; Sigel, 1997). Because of prior negative experiences with members of university settings, researchers are often perceived as outsiders who will implement a research agenda that fails to address the pressing needs and concerns of the community (Sigel, 1997; Spicer, Korfmacher, Hudgens & Emde, 2002). Put simply, history suggests that maintaining mistrust of outsiders is an adaptive position for many members of oppressed or disenfranchised groups.

Participatory action research evolved as an approach to involve community members in the design, implementation, and interpretation of community-based research. Participatory action research is defined as a process through which the researcher becomes an "ally with the community in its struggle against more powerful forces" (Dalton, Elias & Wandersman, 2001, p. 75). Participatory action research considers creating a research agenda that is beneficial to the community, often through giving voice to groups whose ideas are omitted from mainstream research (Kelly, Azelton, Burzette, & Mock, 1994). A common component to successful involvement of participants in community or school-based initiatives is the development of a collaborative relationship (Lerner, Fisher, & Weinberg, 2000; Sigel, 1997). Establishing connections between members of a university research team and members of all levels of an organization, school, or community ensure that empirical results have consequential validity for the population of interest (Fantuzzo, Mendez, & Tighe, 1998; Messick, 1989). In our work within Head Start, we have observed that cross-setting activity is crucial to building collaboration that involves families, teaching or social services staff, agency administration, and community leaders.

A review of the literature on research partnerships reveals common elements to maintaining a successful partnership, several of which now have empirical support. For example, in a survey of 75 research projects funded between 1990 and 1996 by the Head Start Bureau, Lamb-Parker and colleagues determined that positive outcomes were associated with projects whose members

reported high levels of shared decision making (Lamb-Parker, Greenfield, Fantuzzo, Clark & Coolahan, 2002). In their study, shared decision making was assessed by surveying the degree of input by members of the Head Start staff and the research community across multiple years of the research project. Analyses showed that during the initial year, projects with higher self-reported decision making engaged in more discussion about participant's rights. During year two, high shared decision makers spent more time than low shared decision makers discussing research implementation (i.e., data collection, measures). Conversely, programs reporting lower levels of shared decision making reported spending more time discussing barriers to project objectives, especially during year two of the partnership. While outcomes of the individual research projects are not reported, the authors of this study concluded that early attention to partnership issues yielded greater satisfaction and proactive problem solving. Shared decision-making and proactive problem solving helped safeguard the needs of the communities who participated in the research projects (Lamb-Parker et al., 2002).

Case studies of successful partnerships also serve to elucidate concepts like shared decision-making in a rich fashion. Such narratives illustrate key elements of the partnership process, such as communication or discovering a shared vision. Dunst and colleagues define their partnership vision as a "shared picture of the future" (Dunst, et al., 2002, p. 175). Development of a vision allows common goals to emerge, as both researchers and community members share their expectations for desired outcomes from a research project. A strong vision establishes a common framework that undergirds the process of building connections between the researcher and community organization. Flexibility is another dimension of successful partnerships that allow the researcher and community partner to work together (i.e., shared decision-making) to modify practices that are difficult for an agency to adopt. Howard, Dickinson, and Lewkowick (2002) provided specific examples of using a flexible approach in working with an agency. They encountered issues involved in selecting study measures, voicing different priorities of researchers and staff regarding assigning children to intervention groups, and maintaining confidentiality when providing results to the agency. Joint discussion of these crucial issues early in their project translated into a mutually beneficial research partnership examining children's emergent literacy (Howard et al., 2002).

In order to encourage more partnerships between researchers and service providers, Barbarin (1998) offers a set of questions that can serve as a framework for designing a collaborative research endeavor. Areas to address include the relationship between researchers and informants, motivations of community members and researchers, congruence of goals, compatibility of research procedures and service delivery, and cultural relevance of the research agenda. Examination of each domain facilitates research designs and procedures that will produce results more relevant to actual service delivery. Moreover, if research questions are mutually beneficial, the initial inquiry may set the stage for a longer relationship that will enable longitudinal investigations to proceed. Barbarin (1998, p. 299) describes this type of collaboration as "synergistic integration," where research and service are "fused conceptually and procedurally with one another" and cannot be readily disentangled.

## **COLLABORATION TAKES TIME: UNPACKING THE RESILIENCY, PARTNERSHIP-DIRECTED APPROACH**

The Resiliency, Partnership-Directed Approach (RPA) is an example of a stage model designed to establish a synergistic integration between research and service (Fantuzzo, Coolahan, & Weiss, 1997; Fantuzzo & Mohr, 2000). RPA was developed as a strengths-based approach to conducting culturally relevant research within settings that provide Head Start services for preschool children. Since 1965, Head Start programs have used a developmental framework and curriculum to promote wellness for children and families in diverse areas including: cognitive and social development, mental and physical health, parent-child relationships, family support services, and home-school partnerships (Zigler & Styfco, 1994). The RPA framework consists of four stages that have conceptual roots in the original wellness model offered by Cowen. The RPA Stages are (1) Partnering with resistance, (2) Identifying resilience, (3) Engaging and empowering resilient natural helpers to develop effective methods, and (4) Enhancing Head Start service delivery systems based on methods developed in partnership. The RPA framework utilizes the idea of wellness promotion as a tool for creating a "shared vision" for conducting research with Head Start programs.

Initially, RPA was utilized to design and implement university-community collaboration in the cities of Philadelphia and Miami during the early 1990s to support the development of new psychometrically sound assessment instruments for use with culturally diverse preschool children (see Castro, Mendez & Fantuzzo, 2002; Fantuzzo et al., 1998; Mendez, McDermott, & Fantuzzo, 2002 for a review). Parents and teachers were recruited and involved in the development of items for new scales measuring children's social competence and parent involvement in educational activities. Use of focus groups, interviews, and teacher-parent dialogue allowed the researchers to select culturally-relevant items that could assess these important constructs. During these studies, participation rates among predominantly African American and Hispanic caretakers consistently approached 90-100% across multiple classrooms and schools. Because the overarching goals of the initial research partnership were consistent with family's perceptions and goals for enrolling children in Head Start, the data gathered could affect early childhood practice more directly by providing new, valid instruments to assess important child outcomes, such as peer play. The establishment of a successful partnership led to recruitment of large samples over several years to validate the Penn Interactive Peer Play Scale (PIPPS; Fantuzzo et al., 1998) and the Family Involvement Questionnaire (FIQ; Fantuzzo, Tighe & Childs, 2000). Both measures are now published in peer reviewed journals and are used by Head Start programs as self-improvement tools and outcome measures for ongoing research.

In the formative stages of a project, applied researchers and graduate students interested in establishing school and community connections often face an overwhelming question, "How does one get started?" RPA offers applied educational researchers a structure that can guide interested parties in forming a university-community partnership over time. Table 1 presents each of the four stages of the RPA model along with the methods and desired outcomes that accompany each stage. Multiple research questions could be investigated using this general framework, providing that researchers successfully articulate how the questions will advance a wellness research agenda (or some other shared vision that is created through dialogue). In order to illustrate RPA, we use examples from our own story of developing a new university-community partnership. To this end, we describe how our partnership evolved over a four-year period and how it contributed to research related to parent involvement in Head Start.

### *Stage One: Discovering Partners and Partnering with Resistance*

The first stage of RPA is analogous to an informal, open-ended inquiry that is accompanied by intense social networking. This discovery process cannot be driven entirely by the researchers' objectives. In contrast, opportunity for casual, yet informational, dialogue about a mutual area of interest allows the community to "teach" the researcher about the actual needs and concerns of the program participants. During this formative stage, several steps are critical to locating potential partners and beginning to form a partnership. First, efforts to begin dialogue with community members involve self-disclosure and genuine interest in getting to know the community. Researchers are encouraged to listen without forming initial opinions or offering suggestions for improvements. Community leaders may disclose prior involvements with researchers that were successful, along with efforts that ultimately left the community feeling "used" by outsiders who ignored community history or culture (Spicer et al., 2002, p. 345).

In our situation, we were interested in developing a new partnership with a Head Start program to focus on the issue of parent involvement. Before initiating any large research endeavor, we began to network and uncover names of important community leaders who interacted with Head Start programs serving African American children. Through conversations with multiple individuals, we learned names and locations of ongoing research projects. We were careful to understand how these efforts were perceived within the African American community, and we were careful not to infringe upon existing collaborations. Eventually, the investigative phase had yielded enough useful information to allow us to approach key leaders within Head Start in a knowledgeable and respectful fashion to discuss possibilities for a new collaborative research project.

Following an informative phase of detective work, the process of contact can begin in earnest. Gathering background information is a prerequisite for engaging program leaders. In our experience, attempts to learn about an organization reflect a serious commitment by a researcher to earn the respect of community members. This is particularly important when the researcher is not a member of the community, or lacks experience with a particular program like Head Start. This effort conveys an important message that researchers have something to learn, and may serve to break down some of the barriers that arise if researchers approach communities as "experts" who are "in charge."

In our situation, a series of phone calls were placed to provide community and agency leaders with information about our interests in supporting Head Start initiatives and enhancing children's school readiness. We attempted to describe clearly how we learned about their program and, in specific instances, asked for permission to visit the facilities in order to get to know their community better. We almost always encountered polite responses, but also faced resistance as the agency leadership revealed their skepticism about our approach — they were attempting to discern our "true" motivations. We interpreted this resistance as adaptive behavior, or a logical response intended to protect members of their community. Examples of "resistance" that we observed were lack of responsiveness to initial requests for information, delayed responses, or agreements to meet without plans for follow-up discussions. During Stage One, the challenge for the researcher is to maintain a patient attitude while the partnership begins to form.

Phone calls, inevitably, are only useful as a precursor to more engaging and persistent strategies. After initial contacts, researchers need to offer to "go to" the participants instead of expecting participants to "come to" the research. By arranging meetings in community settings or sharing previous experiences, researchers are both conveying genuine interest in the participants and gaining informal, experiential knowledge of the context. While gathering our own background information, we learned of a statewide Head Start Public Festival held each year during October. We shared our intention to visit the festival with Head Start leaders, and they politely encouraged us to attend. We also suspected that they did not believe we would actually participate in the festival. Upon arrival, it was difficult to determine the role of any one individual as the celebration involved hundreds of children, families, teachers, program staff, and agency leaders. Based on our prior experiences with community-based projects, we learned the value of approaching individuals with an assertive, curious, but respectful interpersonal style.

In Stage One of RPA, use of a non-traditional method of contact like attending a community festival can build and can foster the beginnings of collaborative relationship. After several hours at the event, we were successful in obtaining a phone number from the director of our current Head Start partner agency, which services a 10- county area. He encouraged us to contact any of his center directors and conveyed a sense of autonomy on the part of his staff. Therefore, although we had general approval from the central agency leadership, we needed to begin the difficult process of engaging members of local Head Start centers who might be interested in studying parent involvement. Because of our status as outsiders and researchers, we prepared ourselves for open-ended, flexible discussions regarding our true motivations, our prior experience working with parents in Head Start (for example, the development of the Family Involvement Questionnaire), and our "menu" of ideas for developing a new research study with the program. We chose to begin a dialogue with a staff person at one local Head Start center serving 150 children. This staff person had expressed interest in our ideas for enhancing parent involvement at her center. Over a period of several weeks in the fall of 1999, we established a working relationship and were able to use her as a contact for meeting other teachers and parents. At the close of Stage 1, an emerging shared vision that was articulated by researchers, teaching staff and parents was "Collaborate to Involve more Parents in Head Start."

**Table 1 Stages of the Resilience Partnership-Directed Approach and Desired Outcomes of a Synergistic Collaboration**

<b>Stage</b>	<b>Methods and Desired Outcomes</b>
1. Locating Partners and Partnering with Resistance	<ul style="list-style-type: none"> <li>• Information gathering and learning about partners</li> <li>• Listening to concerns of community leaders</li> <li>• Disclosure of motivations</li> <li>• Recognizing resistance as adaptive</li> <li>• Honest and informal dialogue</li> <li>• Assessing congruent interests</li> <li>• Building trust</li> </ul>
2. Identification of Resilient Helpers	<ul style="list-style-type: none"> <li>• Extending invitations to help shape research agenda</li> <li>• Building alliances with natural helpers</li> <li>• Gaining support from multiple contexts</li> <li>• Offering tangible signs of support</li> <li>• Reaching community members via resilient helpers</li> </ul>
3. Empowering Resilient Helpers to Conduct Inquiry	<ul style="list-style-type: none"> <li>• Developing important research questions of mutual interest</li> <li>• Producing new methods of inquiry, including measures, if necessary</li> <li>• Joint participation in data collection efforts</li> <li>• Joint interpretation of the data</li> <li>• Developing recommendations about how to use new knowledge</li> <li>• Sharing findings with community members</li> <li>• Being vigilant and responsive to the community</li> <li>• Praising efforts by partners to conduct inquiry</li> <li>• Uncovering and developing new research questions</li> </ul>
4. Enhancing Service Delivery Systems	<ul style="list-style-type: none"> <li>• Obtaining resources necessary to improve programs</li> <li>• Developing new staff training and programs</li> <li>• Institutionalizing new research knowledge into existing program assessments or services</li> <li>• Using research team resources to enhance the personal and professional goals of the members of the community (creation of jobs, job advancement, advocacy for community needs, letters of reference, community contacts, and referrals)</li> </ul>

### *Stage Two: Identifying Resilience*

Stage Two involves mobilization of community members who will be instrumental in collaborating with the researchers to develop and implement a new research agenda. According to RPA, resilient helpers are individuals who are familiar with adversity through experience with either families or staff members, and yet manage to draw upon either personal or contextual resources to thrive within their situation. Resilient helpers within a community setting, such as a

Head Start program, can often be located because they are naturally engaged in multiple activities to assist children and families that go beyond the expected. Typically, they are talented individuals who excel at coping with the demands of their environment, often with limited resources. Masten (2001) reminds us that resilience is quite ordinary and is not magical by most accounts. The resilient individual maintains a positive outlook; continues to seek new resources for their family, friends, or students; and works to develop creative solutions to problems. These natural helpers are often quietly operating in their job or home environment with competence, yet they may lack the additional support or resources that could allow their influence to be more comprehensive, continuous, or far-reaching. During Stage Two, the researcher recognizes that creating a partnership with a resilient helper benefits the entire community exponentially.

In our work, we have developed two major strategies to facilitate research with resilient teachers, parents, and center directors who are the key individuals responsible for protecting the interests of Head Start children in their communities. The first strategy is to provide resources to the community with no future cost to the participants. Examples that illustrate this principle include but are not limited to a) supervising graduate and undergraduate students enrolled in practica within Head Start classrooms to provide teachers with assistance (upon request) during the school day, b) providing student volunteers to assist with special school events, fieldtrips or fund-raisers c) offering staff development workshops or parent consultation at no cost, d) supporting individuals via informal discussions of their educational goals or career objectives, and e) regularly attending parent policy meetings to listen to parental input, offer ideas if requested, and support involved parents. These activities generally reflect the idea that time and information can be valuable resources that transcend monetary resources.

The second major strategy involves the use of traditional compensation for involvement in research. Participants are given small incentives, like children's books, as appreciation for their participation in the partnership. If possible, future contacts with study participants are proactive and personal in nature. They involve presentations of results to parent leadership groups, and handouts for prior participants describing how the results of studies could affect the daily lives of parents or teachers. These efforts seek to go beyond ethical mandates for sharing research findings with participants because the follow-up contact is designed to facilitate correct interpretation and utilization of the new information by prior participants. During Stage Two of RPA, partnership strategies help develop trust and should lead to greater acceptance of researchers into the life of the community. As Stage Two concludes, resilient helpers begin to share their ideas for change, and observant researchers can use their feedback to construct a mutually beneficial research project.

### *Stage Three: Empowering Helpers to Conduct Inquiry*

During Stage Three, it is crucial that the researcher communicates the importance of building a bridge between existing service delivery and ideas for specific studies that could inform program modifications or promote understanding of child development. As program staff gain experience with research, they become comfortable with using research results within their own work environments. Teachers and parents also begin to share with the research team their ideas for additional projects as they develop their own questions. The gradual involvement of resilient helpers in the design, implementation, and interpretation of research ultimately leads to empowered community members who are involved in an egalitarian relationship with the researcher.



Within our setting, we successfully blended the Head Start program goals with our research questions in support of wellness promotion. Specifically, the second programmatic goal of Head Start is to enhance the capacity of families to support and nurture the development of their children. Therefore, joint review of a common framework like the Head Start Program Performance Standards was an excellent tool for starting a discussion about parent involvement that was an empowering experience for program staff.

An important caveat within this stage is the recognition that empowerment of natural helpers is a gradual process; therefore, experiences with the research must be tailored to the prior exposure and readiness of the individual. For example, an administrator of a large human resources agency may approach research collaboration with a different set of expectations than a parent leader or first year Head Start teacher. Yet, RPA calls for each member of the collaboration to become comfortable and empowered to share their views regarding the nature and degree of the research's impact. If resistance is encountered during this process, or if participant views seem to contradict the direction of the research, it is clearly advisable to return to Stage One to examine reasons for mistrust. When disagreement occurs, discussion and consideration of multiple voices of empowered participants will likely produce a better project, particularly if the dialogue leads to greater synergy between the research procedures and actual service delivery. During this stage, cultural relevance of the research may also emerge as a concern, particularly if a diversity of world-views and cultural perspectives are represented in the discussion of research ideas. Taking time out from implementation of the research project (for example, data collection) to listen to community perspectives will often illustrate the researcher's interest in the enhancement of the community. Failing to do so may potentially confirm a community perception that the study is the only goal that is important to the research team.

Our initial research idea was to involve all parents in the center through a take-home survey of children's play and behavior at home. We felt that using brief questionnaires to survey parents and to ask them about their children's strengths could produce an initial partnership success by involving parents in the assessment process along with teachers. Also, from a scale development perspective, our research team was interested in how parent reports of play would correlate with children's play and language development at school. Due to the time spent in RPA Stages One and Two in relationship formation, we had the support and assistance of all classroom teachers and several resilient parent leaders within our Head Start program. During the spring of 2000, we conducted a small pilot of the assessment procedures and successfully reached 120 families at the center for participation in the study. Each parent received a set of three children's books bought with seed grants from the university and the psychology department. Classroom teachers received donations of \$100200 for purchasing educational supplies. These initial rewards were tangible, tied to participation rates, and set the stage for more sophisticated synergy between wellness research and service delivery.

The results of the survey were able to inform educational practice immediately. For example, the different play styles of children were shared on an individual basis with parents. A user-friendly handout was developed for every parent at the center offering strategies for promoting play within the home environment and reducing aggressive play. Graduate students offered consultation on a voluntary basis during parent meetings regarding children's social behavior. During that school year, we held individual feedback sessions regarding this child assessment

data with close to 40 out of the original 120 parent informants. Teachers incorporated the questionnaire results into their parent-teacher conferences, when parents checked permission for the research team to share the results with staff. We also discussed results with case managers at the center, such that they would be empowered to continue discussions of social development and play with parents in the future. From the researchers' perspective, we documented the positive relation between parent's reports of children's social competence and language development and subsequently published this study (Mendez & Fogle, 2002).

During Stage Three, the major challenge for the research team was to continue to show appreciation for the involvement of the community partners, given that we had established a more familiar relationship. A key concept called "vigilance" best captures the mechanism that helps ensure that the partnership is an evolving and empowering experience for all members. We define vigilance as an awareness of possible threats to partnership and use of a proactive, anticipatory, and reliable approach to all interactions with research participants and program staff. For example, project supervisors would continue to monitor and report any new concerns raised by programs as they became more comfortable sharing their own ideas about the research process. The faculty supervisors engaged in discussions with students about strategies for preserving the unique and special dimension to our community involvement. Faculty and students would routinely make personal visits to early childhood centers to show that we valued our ongoing relationship with community partners. Letters documenting the accomplishments of our resilient partners, especially the center directors, were forwarded bi-annually to the director of the agency. These efforts, along with gestures such as annual certificates of accomplishment for teachers and parents, were our attempt to document the commitment of our early childhood partners to the pursuit of wellness.

#### *Stage Four: Enhancing Head Start Delivery Systems — Challenges to Expansion and Growth*

The fourth stage of RPA involves the transfer of research findings into enhancements of service delivery, programming, or classroom practice. While numerous studies report findings from applied settings, less attention is given to the study of what happens to a program once the research concludes. A synergistic integration, as described by Barbarin (1998), suggests that the termination of a research study may be difficult to detect because the findings regularly give rise to a new set of questions and ideas for programming. In this system, research is used continually for program improvements, and longitudinal investigations build upon prior studies. In our situation, we built upon the parent surveys of play and behavior to expand into research targeting other forms of parent involvement via intervention.

After the parent survey study success, center directors requested greater involvement in considering service delivery for Head Start parents. A key difference between Stages Four and Two was the ownership that Head Start staff were taking in terms of requesting assistance to shape their ideas for reaching out to involve families. For example, one center director requested our help in designing a new workshop series for parents to be modeled after a Back to School Night she had attended in her daughter's elementary school. The eventual series was called "Parent Excellence," which was named by the staff to reflect their belief that all parents at the center were supportive of their children's learning. We agreed to combine the ideas of the staff with scientific knowledge regarding child development to co-construct the meeting content. During fall of 2000, we managed with a limited budget to implement three nightly workshops

where teachers demonstrated educational activities for parents and children. We conducted a small process evaluation and the enthusiasm for the program convinced us to seek funding to develop this idea into a preventative intervention. At a parent meeting, we received unanimous support for submitting a grant proposal to the Head Start Bureau. The pilot Parent Excellence program ultimately served to launch a larger research project, supported by a five- year Head Start Quality Research Center grant awarded to our partnership in March 2001.

Presently, our Quality Research Center (QRC) is working with Head Start programs to study the effects of parent involvement on children's school readiness and modify existing service delivery targeting family-school connections. In many ways, the research now being conducted under the QRC auspices creates another new set of challenges for the partnership. As we considered how best to expand from a survey research study into a community-based parent intervention program, we sought input from both researcher and practitioner sources. An important initial step was to establish a design team to produce a comprehensive intervention that would fit with existing services for parents and that could be empirically studied. Through this expansion, we came to view the RPA model as non-linear. In many ways, we find ourselves continuing to revisit earlier RPA stages to facilitate shared decision making and to ensure that voices of resilient helpers shape the home-school intervention.

Stage Four outcomes are the most complex to achieve, and collaboration may need to occur over several years to ensure that research findings are adopted and yield a higher quality program. In the absence of this accomplishment, psychological research has little hope of influencing the school and community contexts that shape the development of children (Cowen, 1994). Because of these realities, we adopted a model of intervention that utilizes a two-year collaborative framework. In the initial year, early childhood staff and researchers jointly implement the Parent Excellence Series. In the second year, Head Start staff members replicate the intervention independent of researcher participation. Consistent with RPA techniques, students volunteer at the center in order to offer feedback and praise as Head Start staff continue to deliver the parent involvement curriculum. This design allows our team to better understand how program adoption occurs within the context of a strong two-year partnership between our QRC staff and the Head Start community. Ultimately, we believe that RPA is a useful framework for promoting partnership- based decision making, and can be particularly useful in working with Head Start programs that are new to the research process.

#### **COMMITMENT TO LONG-TERM PARTNERSHIP OBJECTIVES: IMPLICATIONS AND CONCLUSIONS**

Our case study of a university-community partnership's evolution over a four-year period illustrates a few of the challenging, yet realistic, choices involved when using a collaborative approach. Use of the Resiliency Partnership-Directed Approach (RPA) was instrumental in establishing the conditions that led to the development of a shared vision involving the promotion of parent involvement. External funding by the Head Start Bureau facilitated the expansion of parent involvement services, while staff training and setting modification provided the conditions for adoption of these new services. Our case study involves efforts by researchers to locate community partners; yet, other case studies illustrate the skill that many agency leaders use to locate researchers to form mutually satisfying collaborations (see Spicer et al., 2002 for one such example).

In our experience, implementation of RPA greatly benefits all members of the early childhood community, especially students in graduate programs. First, graduate education in wellness promotion is enhanced via hands-on experiences for students to apply concepts of prevention, competence, and empowerment. Through interactions with diverse individuals in community settings, graduate students apply their learning in child development, assessment, intervention, and research design while also contemplating the question, "How do I get started?" For members of a majority cultural group, field experiences with ethnically diverse populations may be their first opportunity for honest dialogue about the impact of racism, culture, and discrimination. Such training experiences develop the socio-cultural awareness of a new generation of psychologists, whether they pursue academic appointments or applied careers as human service workers. System change involves training students to work with individuals who are different from themselves along dimensions of race, gender, ethnicity, religion, and social class. Understanding the realities of Head Start children, families, and staff may allow students to pursue intervention and public policy initiatives with a deeper sense of the struggles that accompany poverty.

Second, ethnic minority undergraduate and graduate students are likely to thrive within training experiences that involve fieldwork with minority populations. The challenges involved in understanding the community or members' points of view may allow minority students to display their unique competencies. Research teams comprised of students from diverse backgrounds, as well as ethnically diverse members from community settings, allow for learning to occur regarding cultural norms, attitudes, and may serve to uncover misperceptions or foster a new appreciation for others' experiences. These formative research experiences within a supportive mentoring context could nurture and sustain individuals from minority backgrounds and eventually lead to greater numbers of minority researchers, graduate students, and university faculty (McLoyd, 1998). As the school-age population is diversifying dramatically, graduate programs must respond by training leaders to promote wellness for all groups of children.

Third, RPA helps graduate students and new researchers understand conceptual differences between ethical standards for research conduct and partnership-based decision-making. Table 2 shows a comparison between selected standards taken from the American Educational Research Association's guidelines for ethical research and core elements of RPA. Use of a partnership-based approach to decision-making within research projects seeks to go beyond our code of ethics to create positive community perceptions about the purpose of research. In RPA, an important outcome is to produce practitioners that are skilled at assisting researchers in the design, implementation, and interpretation of research findings. Overall, RPA embraces ethical mandates by strongly encouraging the use of proactive strategies to help research positively affect the communities that provide the data for research studies.

It is our contention and experience that research ideas and interventions that are synergistic and co-constructed are mutually beneficial and satisfying to both academic and applied communities (Barbarin, 1998; Fantuzzo et al., 1998). Maintaining a relationship between a researcher and the community members in an applied setting ensures that ongoing research can proceed with students and faculty who are piloting new ideas and receiving realistic feedback. Overall, a clear explanation of any new project's goals, accompanied by sufficient time for dialogue with the

community, is the best antidote to mistrust and resistance. In our work, we continue to use "the pursuit of wellness" concept as a metaphor for guiding practitioners and participants in the co-construction of research questions that may enhance services for children. The goals and performance standards of Head Start regarding school readiness and family involvement provide us with a roadmap for fostering wellness with children from low-income families. Our partners recognize that the pursuit of wellness is not a result but a journey, which therefore always presents the possibility of future studies, interventions, and improvements in a non-threatening or judgmental fashion. Through continued evolution and use of RPA, we aspire to greater synergy among research and practice to best inform Cowen's (1994) call for traveling on a wellness path.

**Table 2 Comparisons of Selected AERA Ethical Standards and RPA Practices**

<b>I. Responsibilities to the Field</b>	
AERA Standard 5. Educational researchers should attempt to report their findings to all relevant stakeholders, and should refrain from keeping secret or selectively communicating their findings.	RPA Response: Educational researchers should actively seek out and report their findings to all relevant stakeholders, and should express a priori how the results will be shared with stakeholders. Reports of findings should be made in a personal, proactive fashion where possible.
AERA Standard 6. Educational researchers' reports to the public should be written straightforwardly to communicate the practical significance for policy, including limits in effectiveness and generalizability to situations, problems, and contexts. In writing for or communicating with non-researchers, educational researchers must take care not to misrepresent the practical or policy implications of their research or the research of others.	RPA Response: Without communication with researchers after a study concludes, the public and/or study participants may fail to understand the complexity involved in generalizing from one study to future situations. Educational researchers must therefore seek to go beyond written documents to ensure that findings can be utilized within settings. Researchers can explain why certain policy implications may or may not be supported by data collected within a study, and can design a new study to address new concerns of the public.

## II. Research Populations, Educational Institutions, and the Public

AERA Standard 3. Honesty should characterize the relationship between researchers and participants and appropriate institutional representatives. Deception is discouraged; it should only be used when clearly necessary for scientific studies, and should then be minimized. After the study, the researcher should explain to the participants and institutional representatives the reasons for the deception.

RPA Response: Use of deception is harmful to the research partnership because the study participants can question what other information was kept from their awareness. The researchers must understand the consequences of using deception, and should seek to maintain the involvement of the partnership above the scientific utility of deception. We cannot see use of deception in early stages of a research partnership, but could argue for the possibility if participants were made aware prior to the study that deception might occur in a specific instance and they would be made aware of such deception only after the study concluded. The partner would then be in a more egalitarian position with regard to the researcher and able to make a determination regarding the greater good that could result from implementing the study with deception (see Spicer et al., 2002 for a discussion of how a community agency debated the idea of random assignment and participation in the Early Head Start randomized trial).

<p>AERA Standard 6. Educational researchers should exercise caution to ensure that there is no exploitation for personal gain of research populations or of institutional settings of research. Educational researchers should not use their influence over subordinates, students, or others to compel them to participate in research.</p> <p>AERA Standard 7. Researchers have a responsibility to be mindful of cultural, religious, gender, and other significant differences within the research population in the planning, conduct, and reporting of their research.</p>	<p>RPA Response: Power differences exist even if researchers do not exploit them. Therefore, researchers need to engage in dialogue in order to allow members from the practitioner community to feel empowered to voice their questions and concerns about the research. Without this step, researchers may be unaware that their study unintentionally exploited the community or failed to provide a mutually beneficial experience for both researchers and participants.</p> <p>RPA Response: As outsiders to participant communities, researchers often lack the awareness of powerful cultural and worldview differences that affect a research study. Researchers can be blind to a community history of experiencing culturally insensitive research agendas. By inviting partnership building decision-making, researchers will gain awareness of these potential barriers during the planning phases of a research study. Without a partnership model, researchers risk conducting and interpreting study findings without access to important points of view that could shape the use and dissemination of research.</p>
<p>Note. The Ethical Standards of the American Educational Research Association were developed and adopted in June 1992. Revisions were conducted in 1996 and 2000.</p>	

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## REFERENCES

Barbarin, O.A. (1998). Integrating service and research on African American youth and families: Conceptual and methodological issues. In V.C. McLoyd & L. Steinberg (Eds.), *Studying minority adolescents: Conceptual, methodological, and theoretical issues*. Mahwah, NJ: Lawrence Erlbaum.

Castro, M.C., Mendez, J.L. & Fantuzzo, J. (2002). The generalizability of peer play constructs across geographically, ethnically, and linguistically diverse groups of preschool children. *School Psychology Quarterly*, 17, 109-127.

Cauce, A.M., Coronado, N. & Watson, J. (1998). Conceptual, methodological, and statistical issues in culturally competent research. In M. Hernandez & M. Issacs (Eds.), *Promoting cultural competence in children's mental health services* (pp. 305-329). Baltimore, MD: Paul H. Brookes.

Cauce, A.M., Ryan, K.D., & Grove, K. (1998). Children and adolescents of color, where are you? Participation, selection, recruitment, and retention in developmental research. In V.C. McLoyd & L. Steinberg (Eds.), *Studying minority adolescents: Conceptual, methodological, and theoretical issues* (pp. 147-166). Mahwah, NJ: Lawrence Erlbaum.

Cicchetti, D. & Rappaport, J. (2000). *The promotion of wellness in children and families*. Washington, DC: CWLA Press.

Cowen, E.L. (1991). In pursuit of wellness. *American Psychologist*, 46, 404-408.

Cowen, E.L. (1994). The enhancement of psychological wellness: Challenges and opportunities. *American Journal of Community Psychology*, 22, 149-179.

Dalton, J.H., Elias, M.J., & Wandersman, A. (2001). *Community psychology: Linking individuals and communities*. Stamford, CT: Wadsworth.

Dunst, C.J., Mullen, J.H., Smith, M., Mullen, M., Raab, M., Thompson, A., & Trivette, C.M. (2002). Shared vision as the foundation for a university-community collaboration. *NHSA Dialog*, 5, 174-190.

Fantuzzo, J., Coolahan, K., & Weiss, A. (1997). Resiliency partnership-directed intervention: Enhancing the social competencies of preschool victims of physical abuse by developing peer resources and community strengths. In D. Cicchetti & S.L. Toth (Eds.), *Rochester Symposium on Developmental Psychopathology, Vols. 8 & 9: The effects of trauma on the developmental process* (pp. 463-490). Rochester, NY: University of Rochester Press.

Fantuzzo, J., Mendez, J., & Tighe, E. (1998). Parental assessment of peer play: Developmental and validation of the parent version of the Penn Interactive Peer Play Scale. *Early Childhood Research Quarterly*, 13, 655-672.

Fantuzzo, J.W. & Mohr, W.K. (2000). Pursuit of wellness in Head Start: Making beneficial connections for children and families. In D. Cicchetti et al., (Eds.), *The promotion of wellness in children and families* (pp. 341-369). Washington, DC: CWLA Press.

Garcia Coll, C., Lamberty, G., Jenkins, R., McAdoo, H., Crnic, K., Wasik, B., & Vazquez Garcia, H. (1996). An integrative model for the study of developmental competencies in minority children. *Child Development*, 67, 1891-1914.

Graham, S. (1992). Most of the subjects were White and middle class: Trends in published research on African Americans in selected APA journals, 1970-1989. *American Psychologist*, 47, 629-639.

Howard, C., Dickinson, D.K., & Lewkowicz, C. (2002). Both sides now: An examination of the relationship between researchers and Head Start practitioners. *NHSA Dialog*, 5, 240-255.



- Kelly, J.G., Azelton, S., Burzette, R. & Mock, L. (1994). Creating social settings for diversity: An ecological thesis. In E.J. Trickett, R.J. Watts, & D. Birman (Eds.), *Human diversity: Perspectives on people in context* (pp. 424-450). San Francisco: Jossey-Bass.
- Lamb-Parker, F., Greenfield, D.B., Fantuzzo, J.W., Clark, C., & Coolahan, K.C. (2002). Shared decision making in early childhood research: A foundation for successful community-university partnerships. *NHSA Dialog*, 5, 356-377.
- Lerner, R.M., Fisher, C.B., & Weinberg, R.A. (2000). Toward a science for and of the people: Promoting civil society through the application of developmental science. *Child Development*, 71(1), 11-20.
- Masten, A. (2001). Ordinary magic: Resilience processes in development. *American Psychologist*, 56(3), 227-238.
- McLoyd, V.C. (1990). The impact of economic hardship on black families and children: Psychological distress, parenting, and socioemotional development. *Child Development*, 61, 311-346.
- McLoyd, V.C. (1998). Changing demographics in the American population: Implications for research on minority children and adolescents. In V.C. McLoyd & L. Steinberg (Eds.), *Studying minority adolescents: Conceptual, methodological, and theoretical issues*. Mahwah, NJ: Lawrence Erlbaum.
- McLoyd, V.C. & Ceballo, R. (1998). Conceptualizing and assessing economic context: Issues in the study of race and child development. In V.C. McLoyd & L. Steinberg (Eds.), *Studying minority adolescents: Conceptual, methodological, and theoretical issues*. Mahwah, NJ: Lawrence Erlbaum.
- Mendez, J.L., Fantuzzo, J., & Cicchetti, D. (2002). Profiles of social competence with low-income African American preschool children. *Child Development*, 73(4), 1085-1100.
- Mendez, J.L., & Fogle, L.M. (2002). Parental reports of preschool children's social behavior: Relations among peer play, language competence and problem behavior. *Journal of Psychoeducational Assessment*, 20, 374-389.
- Mendez, J.L., McDermott, P.A., & Fantuzzo, J. (2002). Identifying and promoting social competence with African American preschool children: Developmental and contextual considerations. *Psychology and the Schools*, 39, 111-123.
- Messick, S. (1989). Validity. In R. L. Linn (Ed.), *Educational measurement* (3rd ed., pp. 13-103). New York: Macmillan.
- Sarason, S. (2000). Porgy and Bess and the concept of wellness. In D. Cicchetti et al., (Eds.), *The promotion of wellness in children and families* (pp. 427-437). Washington, DC: CWLA.
- Sigel, I.E. (1997). Practice and research: A problem in developing communication and cooperation: An outlook. In I. E. Sigel & K. A. Renninger (Eds.), *Child psychology in practice*, vol. 4: *Handbook of child psychology* (5th edition).
- Spencer, M.B. (1990). Development of minority children: An introduction. *Child Development*, 61, 267-269.
- Spicer, P., Korfmacher, J., Hudgens, T. & Emde, R. (2002). Joining communities: The value of an ethnographic approach in early childhood intervention research. *NHSA Dialog*, 5, 340-355.
- Wiley, A. & Rappaport, J. (2000). Empowerment, wellness, and the politics of development. In D. Cicchetti et al., (Eds.), *The promotion of wellness in children and families* (pp. 59-99). Washington, DC: CWLA Press.
- Zigler, E., & Styfco, S. J. (1994). Head Start: Criticisms in a constructive context. *American Psychologist*, 49, 127-132.